

# Operation Iraqi Freedom: Thoughts from a deployed Occupational Therapist

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The deployment of many of our colleagues in support of the Global War on Terrorism has had an effect on us all. In addition to many Specialist Corps officers being deployed, the workload for those in Germany and who remain in CONUS has increased. I was one of those fortunate to be in the right unit at the right time, and have had the opportunity to deploy twice. (Guantanamo Bay, Cuba and most recently to Kuwait and Iraq) I consider myself fortunate because it has truly been a challenging yet rewarding experience; I recognize that not all of us get that opportunity.

During my time in Iraq, there is one experience in particular that really stands out as memorable. One day the Civil-Military Affairs Officer of the brigade I was supporting asked me to accompany him on a visit a local Iraqi rehabilitation center. (One of two rehabilitation centers in Iraq) Entering the facility was like taking a step back in time. As we walked down dark, quiet hallways, the years of neglect and lack of financial support had clearly taken their toll. I observed signs on the outside of offices written in English and Arabic that read “social work”, “physiotherapy” “hydrotherapy”, and .... “occupational therapy”! I was so surprised to see that sign!

First, we walked through the physiotherapy clinic (aka “physical therapy”). It was busy with several treatment tables on which patients were receiving treatments with physical agent modalities and exercise. The next stop was the occupational therapy clinic. When I walked in it was as if I had stepped onto a page in history. The first thing I saw was a loom on the counter! I later saw a large, floor loom as well. (My fellow occupational therapists who were trained “back in the day” will remember these!) There was a small kiln in one corner. We then entered the main workshop. It looked much like any typical occupational therapy workshop, with large tables in the center and shelves along the wall. The shelves were empty, except for one handmade game with pegs. (It reminded me of an occupational therapy intern’s project!) The administrator explained that they were not able to use the occupational therapy clinic for a while because of the limited number of occupational therapists and the need to focus efforts elsewhere in the hospital. He did hope that would change soon, now that the hospital was receiving much needed assistance.

My next stop was the “limb fitting” shop, where lower extremity prostheses are made – from the mold to the finished product. (I noticed there were no upper extremity prostheses!) Unfortunately, I was not able to accept the offer to go to the ward and see patients as my escorts had to leave. It was a quick trip, but it provided a glimpse into the personal lives of the Iraqi people. These people were very proud of their facility, and excited to now be able to provide their services to *any* citizen of Iraq. When I envision the future there, I can see a bustling occupational therapy workshop!



*Lower extremity prostheses molds and patterns*



*MAJ Newton with Iraq Physicians*



*Lower extremity prostheses*